PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/751,584			Filing Date 01/05/2004		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY	
FOR			NUMBER FI	.ED	NUMBER EXTE	UMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A	N/A		N/A		]	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A		]	N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *				x \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *				x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	eets of pap \$250 (\$125 ditional 50	wings exceed cation size fee tity) for each ction thereof. 37 CFR 1.16	due See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										]			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		]	TOTAL		
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMAL										ER THAN ALL ENTITY			
AMENDMENT	12/19/2008	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSI PAID FOR	LY PRESI			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 18	Minus	<b>~</b> 25	= 0			x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 1	Minus	···3	= 0			x \$ =		OR	X \$220=	0	
M	Application Size Fee (37 CFR 1.16(s))												
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
_		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUS PAID FOR	R PRESI			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))	•	Minus	**	=			x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1,16(h))	*	Minus	***				x \$ =		OR	x s =		
Ш	Application Size Fee (37 CFR 1.16(s))								]				
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** 11	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20".  "MOLIKI I. MAY/  The "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "Clotal or independent) is the highest number found in the appropriate box in column 1.												

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